## PATENT APPLICATION FEE DETERMINATION RECORD

Effective October 1, 2003

Application or Docket Number

10706247

CLAIMS AS FILED - PART I					1	SMALL ENTITY			NTITY		OTHER	THAN	
TOTAL CLAIMS			(Column 1)		(Column 2)			TYPE		OR		SMALL ENTITY	
			4				ŀ	RATE	FEE	] [	RATE	FEE	
FOR			NUMBER FILED		NUMBER EXTRA			BASIC FEE	385.00	OR	BASIC FEE	770.00	
TOTAL CHARGEABLE CLAIMS			( minus 20=		•			X\$ 9=		OR	X\$18=		
INDEPENDENT CLAIMS			minus 3 =		*			X43=		OR	X86=		
MULTIPLE DEPENDENT CLAIM PRESENT								+145=		OR	+290=		
* If the difference in column 1 is less than zero, en					"0" in c	column 2	1	TOTAL		OR	TOTAL	770	
10	CLAIMS AS AMENDED - PART II  (Column 1) (Column 2) (Column 3)  CLAIMS HIGHEST						<u>.</u>	SMALL	ENTITY	OR	OTHER SMALL I		
<b>AMENDMENT A</b>		REMAINING AFTER AMENDMENT		NUME PREVIO PAID F	BER	PRESENT		RATE	ADDI- TIONAL FEE/		RATE	ADDI- TIONAL \FEE	
	Total	. 4	Minus	# Z	0	20		X\$ 9=	$\setminus /$	OR	X\$18=	'\ /	
	Independent FIRST PRESE	NTATION OF MI	Minus	PENDENT	3 CTAIM	= 0		X43=	X	OR	X86=	X	
FIRST PRESENTATION OF MULTIPLE DEPENDENT CLAIM								+145= /		OR	+290=		
							A	TOTAL ODIT. FEE	/	OR ,	TOTAL ADDIT, FEB		
		(Column 1)		(Colum		(Column 3)	-				I		
AMENDMENT B		CLAIMS REMAINING AFTER AMENDMENT		HIGHE NUMB PREVIOU PAID F	ER USLY	PRESENT EXTRA		RATE	ADDI- TIONAL FEE		RATE	ADDI- TIONAL FEE	
	Total	*	Minus	**		=	lΓ	X\$ 9=		OR	X\$18=		
	Independent	*	Minus	***		=		X43=			X86=		
~	FIRST PRESE	NTATION OF ML	ILTIPLE DEP	ENDENT	CLAIM		▎├	<del>///0-</del>		OR	700=		
							L	+145=		OR	+290=	i	
:							Al	TOTAL DDIT. FEE		OR ,	TOTAL ODIT. FEE		
		(Column 1)		(Columi		(Column 3)							
€L		CLAIMS REMAINING AFTER AMENDMENT		HIGHE NUMBE PREVIOU PAID FO	ER JSLY	PRESENT EXTRA			ADDI- IONAL FEE	•	RAŢE	ADDI- TIONAL FEE	
	Total	•	Minus	**		=		X\$ 9=		OR	X\$18=		
	Independent		Minus	***		=	┞	X43=			-		
1	FIRST PRESENTATION OF MULTIPLE DEPENDENT CLAIM						<b> </b>	A43=	——I°	DR	X86=		
• If the ntry in column 1 is less than the entry in column 2, write "0" in column 3.										)R	+290=		
** If the "Highest Number Previously Paid For" IN THIS SPACE is less than 20, enter "20."  ***If the "Highest Number Previously Paid For" IN THIS SPACE is less than 3, enter "3."  The "Highest Number Previously Paid For" (Total or Independent) is the highest number found in the appropriate box in column 1.													
1	ne Highest Numi	per Previously Paid	For" (Total or	Independen	t) is the I	nighest number	found	in the appr	opriate box i	n colu	mn 1.		